PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop Los UE FEE

Mail Stop 10.5 UE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notifica			,	•		arate FEE ADDRESS for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
3624	7590 01/18		na v		•		
VOLPE AND	KOENIG, P.C.		I he	Certificat	e of Mailing or Trans	smission a denosited with the United	
UNITED PLAZ	•		Stat	es Postal Service with su	fficient postage for fit	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
30 SOUTH 17T	•		add tran	ressed to the Mail Stop	ISSUE FEE address	above, or being facsimile	
PHILADELPHI				Stephen B.		(Depositor's name)	
				CharlesBlazz		(Signature)	
				April II 2	008	(Date)	
			<u> </u>	(10227 -27)		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	АТТО	DRNEY DOCKET NO.	CONFIRMATION NO.	
10/663,560 09/15/2003			Mario Meggiolan CAM3-PT048		4498		
	-	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL EEE/S) DUE	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	XS NO	<u> </u>		\$0 T	*1740	04/18/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS	J			
STORMER, RUSSELL D 3617			301-058000		7/01==	nd Voons o (//	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list Volpe and Koenig, PC				
	ondence address (or Cha	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
	ondence address (or Cha 3/122) attached.		(2) the name of a single firm (having as a member a 2				
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address 2 or more recent) attach	" Indication form led. Use of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or type	pe)	_		
PLEASE NOTE: Unl recordation as set fort	ess an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee bletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assignee is i assignment.	dentified below, the o	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Campagnolo			Vicenza, Italy				
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual Topporat	ion or other private gr	oup entity Government	
4a. The following fee(s)	are submitted:	· 4t	o, Payment of Fee(s): (Plea	se first reapply any pre	viously paid issue fee	shown above)	
Tissue Fee							
Publication Fee (N	o small entity discount p	permitted)	Payment by credit card. Form PTO-2038 is attached.				
☐ Advance Order - #	f of Copies	_ _	The Director is hereby overpayment, to Depo	authorized to charge sit Account Number 22	0793 (enclose a	eficiency, or credit any on extra copy of this form).	
5. Change in Entity Sta							
	S SMALL ENTITY statu		b. Applicant is no lon	ger claiming SMALL EN	TITY status. See 37 C	FR 1.27(g)(2).	
interest as shown by the	ecords of the United Sta	tes Patent and Trademark	Office.	he applicant; a registered	attorney or agent; or t	he assignee or other party in	
Authorized Signature Leghers Selvo			· 	DateAp	ril 11, 2008	<u> </u>	
Typed or printed name Stephen B. Schott			Date				
This collection of inform an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bur irginia 22313-1450. DO	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (on is required to obtain or r 1.14. This collection is est depending upon the indivention office Chief Information Office COMPLETED FORMS TO	etain a henefit by the nub	lic which is to file (an	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.